PTG/SB/05 (08-03)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Application or Oocket Number 09/782329		
CLAIMS AS FILED - PART I (Column 1) (Cotumn 2)								SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
Γ	FOR NUMBER FILED				NUM	NUMBER EXTRA		RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.18(a))						1		\$	OR		1	
TOTAL CLABAS [3] CFR 1.166 g nitrus 20 *							7) \$ E		CK	Σ5.	
IND	EPENDENT CLA	us					1	1	 	1	<u> </u>	
(37 CFR 1.16(b)) mlnus 3 : .							┨	x s		OR	× 5 *	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(4))							J	+ 5		OR	+1	
* If the difference in column 1 is tess than zero, enter *0* in column 2.								TOTAL	L	OR	TOTAL	L
. CLAIMS AS AMENDED - PART II												
	(Column 1) (Column 2) (Column 3)							SMALL (NTITY	OR		THAN
	I	1	LAIMS		HIGHEST	T	٦			i		ENTITY
AMENDMENT A			MAINING AFTER NOMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
M	Lotat Lotat Lotat		2	Minus	. 50	1. 1		x s =		OR	x \$=	
집	Independent (37 CFR 1 HGED		2	Minus	<i>"</i> 3	- 1	1	x s =		OR	x s =	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAM (37 CFR 1.16(d))							+5 =		OR	+ 5 -	
1	Splan							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
n	$\gamma \omega =$	(Co	dumn 1)		(Column 2)							
NT B		RE	LAIMS MAINING IFTER NOMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
×	Total (37 CFR + 16(c))		4,	Minus	(21)	•	1	x 5 v		OR	xs =	
AMENDMENT	Independent (37 CFR 1 16(b))	. /	4	Minus		1. /	1	xs/(7).	1(3)	OR	x s	-
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,16(4))							+ 5 =		OR.	+5 .	
									100	O R	TOTAL ADD'L FEE	
		<u> </u>	lumn 1)		(Column 2)	(Column 3)	_					
NTC		REN	LAIMS MAINING FTER NOMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ž	Total or cre culch	•		timus	••	-	1	X \$=		OR	x 5 =	
AMENDMENT	Independent (37 EI B 1 16(6))	•		Minus	***		1	x s =		OR	x s=	
₹	FIRST PRESENT	ATION	OF MULTIPLE	DEPENDE	NT DAM (37 C	FR 1.16(d))	1	+5 =		OR	+ 5 -	
										OR	TOTAL ADD'L FEE	
* If the entry in column 1 is loss than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is in file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 127 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of lime you require to complete this form and/or suggestions for require, should be sent to the Chief Information Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND T.O. Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column t